

# The Quarterly Journal



St. Luke's Hospital 1964 Annual Report Issue

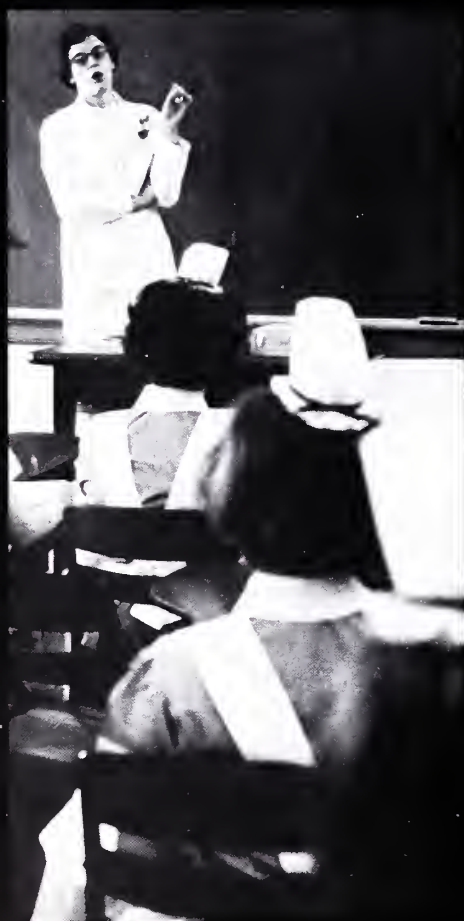
## Patient Care

### ■ Education Research

In the 1850's when William Augustus Muhlenberg set about establishing St. Luke's Hospital, medicine was a relatively static science. Its body of knowledge was, by today's standards, miniscule; its techniques, equipment and skills almost primitive. But even during the early years, physicians at St. Luke's spent a part of their time teaching their arts to newly graduated doctors. ■ Today, though still primarily a place of healing, St. Luke's

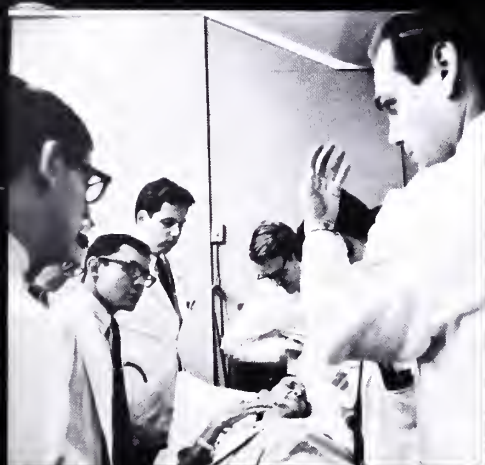
devotes a major portion of its time and energies to the continuing process of education. Medical and nursing students, interns and residents, as well as staff physicians and surgeons, participate in the classes, conferences, rounds, and lectures which comprise the St. Luke's tutorial establishment. ■ The explosion in medical-scientific knowledge means that medicine and nursing in the twentieth century have become professions in which the educational process must continue if excellence is to be achieved and then maintained. For doctors or nurses to be out of touch with the advances in their fields

would be to seriously hinder professional competence. A 1947 agreement between St. Luke's and the College of Physicians and Surgeons of Columbia University provides clinical training for medical students at St. Luke's and involves fifty-two of the St. Luke's staff as members of the P & S faculty. ■ The School of Nursing of St. Luke's Hospital has graduated more than 3,000 nurses and remains a leader in the field of nursing education. ■ Every day in the year, by participating in the education of interns and residents, by attending scheduled lectures and rounds, by working in the clinics, members of





the Attending and Courtesy staffs contribute in large measure to the excellence and glowing reputation of St. Luke's. These activities not only serve others, but help the physician to maintain his professional awareness and competence. ■ It has been said many times that the practice of medicine and the care of patients reach their highest levels in the atmosphere of a teaching hospital—where there is evident the constant spirit of inquiry and the stimulus of the educational process. ■ At St. Luke's too, education achieves its ultimate good through the improved care of all patients.



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# The Dual Century Fund: Three Years and \$11,500,000 Later

Rather than recount the general activity and progress of St. Luke's and Woman's Hospitals during the past year, I would like to take this opportunity to discuss the activities of the Dual Century Fund and the general growth of our development plans during the past three years.

At the beginning of this period it was my pleasure to serve as Chairman of the Dual Century Fund and for the past year and a half I have had the opportunity of serving as President of St. Luke's. In both jobs I have appreciated the great support and generosity of the many friends of St. Luke's, and in this Annual Report issue of the Quarterly Journal we list the names of those many friends who have thus far assisted our ambitious building programs.

A little more than three years ago, when friends and family of St. Luke's Hospital gathered to learn of a major program of expansion, the vehicle for raising the necessary funds was sent on its way. The Dual Century Fund, as this campaign was called, was, through its title an inherent reminder of the concurrent centuries of service given to New York by both St. Luke's and Woman's Hospitals.

The goal of this fund was \$11,500,-

000. The larger portion of these millions would build a new home for the Woman's Hospital adjacent and connected to the main St. Luke's buildings; a lesser amount would provide a new Service and Research Center building to replace the 70-year-old Vanderbilt building. This Center would add space for laboratories and room for the expansion of the many St. Luke's departments which would be serving the patients of Woman's Hospital as well.

Though this financial goal and the building plans were considered almost overly ambitious at the time, in three years both have been greatly expanded. And to the great credit of those who have worked to raise these funds, the original goal of \$11,500,000 has been met and exceeded, through a combination of personal, corporate and foundation generosity, plus government grants, the sale of property and several major bequests.

It was thought by all of us three years ago, that reaching that magic figure would indicate the completion of the job; but need piling upon need, has created instead a requirement half again as large as the total announced initially. One of the buildings, the new Woman's Hospital,

nears completion (dedication scheduled for late May, 1965)—its final costs more than \$2,000,000 higher than the first estimates. Plans for the Service and Research Center have gone through any number of modifications as requirements change or develop from one day to the next. Those who will bid on the proposed structure, will deal with a building two floors higher and, again, an estimated \$2,000,000 more costly than the building first proposed.

As plans for the construction of the original elements of the Dual Century Program have moved ahead, two other projects have developed. One, a 15-floor garage-apartment, though not directly related, is vital to the future of the hospital. The garage will service the entire Hospital Family, plus numbers of visitors, relieving the present intolerable parking problem. The 127-unit apartment house will alleviate the severe housing shortage for interns, residents, nurses and other hospital personnel. The total cost for this relatively low cost form of building is \$3,000,000 of which all but \$750,000 is available in the form of building loans.

The second project is, in the face of skyrocketing building costs, a bar-







gain at its \$1,000,000 price tag. Years ago, before the days of air-conditioning, fluorescent lighting and space shortages, a great many buildings were constructed around vast, open wells. The skylight above provided a source of light and air, but the usable space was only at the outer perimeter of the building. St. Luke's "Vanderbilt Building" is a prime example of such "open well" construction. Graceful wrought iron railings surround the balcony walkways which rise up around eight floors of expansive openness. As Victorian architecture, the building won a prize at the Paris Exposition of 1896, the year it was completed. Yet, in 1965, pragmatists are forced to view it only as a structure in which more than half of the potential space is lost. There is no practical means of flooring over these open areas, for the structure cannot possibly take such extensive modification. The only answer for the Vanderbilt site is a totally new building.

The Travers building is similar, though not constructed on as grand a scale as Vanderbilt. Completed in 1911, it was also built around a center well. Attempts to gain more space here will prove more fruitful, for engineers have discovered that the area beneath the building will take the support columns necessary to carry the weight of crossbeams and covering slabs on all floors. This construction will add more than 80,000 square feet at a cost less than the annual rental of that much office space. Travers building plans call for central air-conditioning to service the enlarged area, plus a doctors' dining room: a memorial to one of St. Luke's major benefactors.

As much as this total program seems to answer present and future needs, our past three years' experience has shown that the future will continue to present new challenges to St. Luke's. The current program is phased so that the Travers building will be completed before demolition

of the Vanderbilt building begins. At that time, and for an indefinite period, many of the present Vanderbilt laboratories and other activities will be transferred to the renovated Travers floors, while the new Service and Research building rises on the site of the old Vanderbilt building. Planners estimate that at least four years (distant planning in a field as constantly



changing and growing as hospitals and medicine) will pass before this entire program of building will be complete.

A major example of the rapid changes which have taken place in just three years, is the growth of activity in St. Luke's Cardiopulmonary Laboratory. As the research activities of the group provide new treatment techniques, greater and greater demands are placed on the areas which only three years ago seemed adequate.

Currently the Cardiopulmonary staff works in no fewer than five widely separated locations in the Hospital. The new Service and Re-

search building will provide this increasingly busy group with renovated space in an existing building, contiguous with floors in the new building, thus creating a large centralized area for research, diagnosis and treatment of heart and lung problems. In addition to laboratories and treatment areas, this "heart-lung center" will contain a 21-bed progressive care unit, a relatively new development in the specialized care required by victims of heart and lung diseases. Such a unit was not even considered three years ago when the Dual Century Fund began.

Of course, what was needed three years ago is still needed now; even more, with the increasing pressures of three years' growth. The resources available to meet these needs have also grown. Basically, these resources were, and are, the friends of St. Luke's and Woman's Hospitals: people and institutions who have come to know and respect the reputation and service of two venerable medical landmarks. During the past three years, as more and more people have learned of St. Luke's and Woman's, their response to the needs of the two institutions has been inspiring, and—over the three years—consistent. The "habit" of giving thus established by so many, plus the steady increase in numbers of contributors, gives the trustees of the hospital confidence to continue building despite the millions still required to complete the entire program.

Still others will be enlisted in this corps of givers, so that the constantly expanding physical and financial needs of St. Luke's will be met in an orderly manner. The Honor Roll of names which accompanies this article will be steadily increased in the coming years. And the growth of this list will herald the continued expansion of St. Luke's service to the community through both larger and better facilities and more ambitious programs of patient care, teaching and research.

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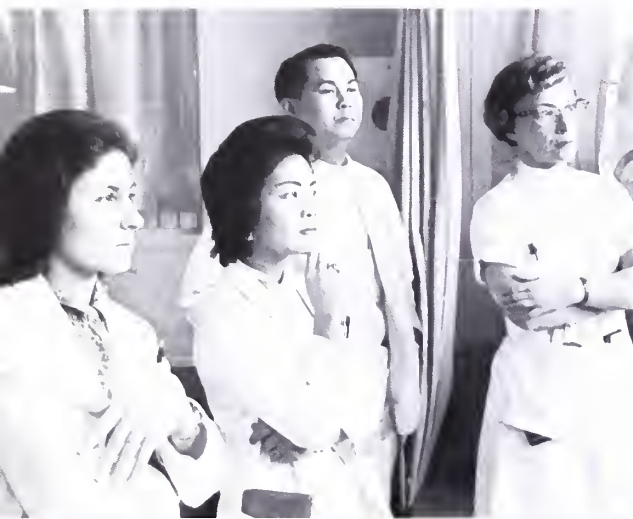
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# "...a well conducted



In the St. Luke's Annual Report of 1864, Dr. Charles W. Packard stated that, "Sufferers are learning that a well conducted Hospital affords the most prompt and effective relief." But one century ago when patient reaction to the apparently timeless efficiency and order of St. Luke's was noted by Dr. Packard, the entire medical staff consisted of just fifteen doctors. Today there are 585 physicians and surgeons on all the staffs of St. Luke's. Those of the Attending Staff who form the Medical Board are concerned with nearly every aspect of the Hospital's programs of patient care, teaching and research.

The effective function of the Medical Board is the result of the daily work of its thirty-three Committees. An effort was made this year to increase the size of each major committee to allow more doctors to become familiar with and to participate in all phases of Medical Staff activities. This emphasis on communication and orientation is especially important during the active integration of St. Luke's and Woman's Hospitals.

In 1964—The Board amended one, and established two new rules. The former, pertaining to medical records, was rewritten. Patients records must now be completed within two weeks of a patient's discharge. If not, certain disciplinary actions are instituted. As a result of this rule, incomplete records are at an all time low. The work of the Records Committee under Dr. Stafford Wearn deserves special credit.

In May 1964, Rule #49 was passed outlining the methods by which an individual investigator obtains authority for clinical investigations in which patients and volunteers are the subjects. As a corollary—a Clinical Investigation Advisory Committee (consisting of the Chiefs of Services) was established.

On November 11, 1964, The Board authorized Rule #50—whereby all private and semi-private patients must be seen within twenty-four hours of admission by the responsible attending physician, or his designated St. Luke's Staff associate. Such physician, or substitute, must be available at all times till the patient's discharge.

Many committees worked hard toward solving specific problems. The Committee on Out-Patient Department worked out a Screening Service in the Emergency Room to help divert non-emergent patients. This committee studied our hospital participation in an ambulance service and recommended physical changes in the Emergency Room necessary before we could accept such an assignment.

The Ad Hoc Committee, under Dr. Ada, to study the long range place of Research at St. Luke's presented a timely recognition of this work both now and in the future. In 1964 \$1,277,000 was expended in the research area. It was recommended that this program always be supervised by full time professional investigators, be self supporting and of no cost to the general hospital budget.



# Hospital..."

The Ad Hoc Committee on Cardio-Pulmonary Resuscitation, under Dr. Bell, formulated a standard procedure for the hospital. This includes general emergency instructions, and specific team responsibilities.

The Ad Hoc Committee on Home Care recommended on November 11th that St. Luke's participate in the AHS-UMS Home Care Program. The Executive Director appointed a director for this work, Miss Louise Candland, who will start April 1st, 1965.

The Study and Planning Committee has worked over the plans for the Travers remodeling and the "Vanderbilt Replacement" or Special Services building. Spatial assignments have been agreed upon and working plans are in preparation.

All other committees and their members have contributed time and presented constructive ideas to the Board and Administration. The Patient Safety Committee, The Disaster Committee and Hospital Use Committee have made significant studies toward improved techniques and services.

Although not mentioned specifically—all other Committees have been active and their chairmen and members deserve the appreciation of the Board.

In addition to this committee work and the direct care of patients, the Medical and Surgical Staff participated in teaching 49 Medical Students, mostly fourth year students from Columbia, on the Wards and in the Operating Rooms and Laborator-

ies of the Hospital. Fifty-two members of our St. Luke's Staff hold faculty appointments at the College of Physicians and Surgeons. Many of the men participate in the teaching program not only at St. Luke's—but also in the Clinics, Wards, and Lecture Rooms at the 168th Street Medical Center.

In 1964—there were at one time or another—71 research projects being conducted at St. Luke's. Although most of these investigations were done by the Medical and Surgical Services, nearly every service of the Hospital has some of its Members involved in a project, many of which are conducted as inter-service co-operative efforts.

As do all segments of the St. Luke's family, the Medical Board looks forward to the arrival of the Woman's Hospital in its new home so that the entire Medical Staff will be a geographically as well as organizationally cohesive unit.

The complete report of each department of St. Luke's will be presented by the Directors of each department in the "St. Luke's 1964 Scientific and Statistical Reports" to be issued during the summer of 1965. Included will be details of the activities of the following services: Anesthesia, Dermatology, Medicine, Obstetrics and Gynecology, Ophthalmology, Oral Surgery and Dentistry, Orthopedics, Otolaryngology, Pathology, Pediatrics, Physical Medicine, Psychiatry, Radiology, Surgery, and Urology.





Report of the Executive Director... Charles W. Davidson

# A Look Over the Shoulder

## ADMINISTRATIVE PERSONNEL

Executive Director:  
Charles W. Davidson

## FOR ST. LUKE'S HOSPITAL:

Associate Director:  
E. Grey Gooby

Assistant Directors:  
F. Dennis Harrington  
Arthur R. Slothower

## FOR THE WOMAN'S HOSPITAL:

Director:  
Carl P. Wright, Jr.

Assistant Director:  
Miss Mary Meehan

## FOR THE CONVALESCENT HOSPITAL (closed, May, 1964)

Administrator:  
Benita Cirulis

The end of each year inevitably presents the opportunity to review the previous twelve months. And every year it seems this review must be couched in superlatives: the *most* this, the *highest* that, and so on. But this very hyperbole is a dominant fact of life in today's hospitals. We do more each year, and we spend more doing it. As our patient services are expanded, so, logically, must each batch of statistics reflect the increases. Our costs, which are pushed upwards by St. Luke's commitment to total excellence, are leveled somewhat by stringent cost controls; nevertheless they continue to rise. Our research programs forge ahead and more and more money, in the form of restricted gifts and grants, goes to support them.

Non-statistically, our 1964 growth is told in terms of more ambitious programs of patient care: in the community, through the home care programs of the Community Health Studies Unit and preventive psychiatry, counselling and work with community agencies by the Community Psychiatry Unit; through improvement and modification of teaching programs, notably the School of Nursing where a revised curriculum has been developed to permit graduation of nurses in a shorter period of time; and throughout the entire hospital by greater utilization of facilities and increased development of patient care programs.

A symbol of this continuing growth in services and costs was the installa-

tion during 1964 of data processing equipment which will provide us among other things with "instant statistics." This month's or week's or day's costs or figures in any area can be compared in a few whirls and clicks of a memory drum to the same costs or figures for last month, last week, or yesterday. But while comparison of specific costs and other such data is essential in an institution which spends more than \$15,000,000 a year, sometimes comparisons of figures less current than last month's or last year's, can provide us with an interesting and historic glimpse of our total progress.

Ten years ago, in 1954, we had just opened the Clark Building. Similarly, now we eagerly anticipate the opening of the new Woman's Hospital in the spring of 1965. In 1954, the Woman's Hospital had just undergone extensive renovation and redecoration. The merger with St. Luke's was barely two years old and the pangs of re-adjustment were still sharp.

In 1954, construction had started on the Stuyvesant Pavilion, and as a parallel, last year we completed plans for major renovation of the Travers building—(gaining 80,000 square feet of usable office space by filling in that 40 year old building's large center well)—and had virtually completed plans for the new Service and Research Building which will rise on the site of the Vanderbilt building. During the year, we also made public our plans to build a garage-apartment building opposite the Clark building



on Amsterdam Avenue. This facility for 150 cars, 127 apartment units, a floor of physicians' private offices and street level stores will alleviate many community problems in the areas of staff housing and automobile parking space.

In 1954, 750 patients received care at St. Luke's Convalescent Hospital, Greenwich, Conn. In the intervening ten years, techniques, therapies and concepts have changed. The original premise under which the Convalescent Hospital was founded in 1927, was that long periods of rest and fresh air were needed to recuperate. By 1964 such ideas had given way to the realization that early ambulation, physical therapy and certain specific medications were often more beneficial in regaining full health.

This change in medical thinking, plus rising annual losses in the Convalescent Hospital forced the trustees to conclude that, after 37 years, the hospital should be closed. Its sale was completed in the Fall of 1964. The Convalescent Hospital was made possible by the great interest and generosity of Mrs. Hicks Arnold who contributed not only the property and the necessary money, but also the creative impetus required. The Trustees plan to perpetuate her name by designating the Heart and Lung Center, which will occupy two floors of the new Service and Research Building, as the Arnold Heart-Lung Center. The George H. Scott Fund, which provided income for the convalescent care for many unable to



Above: Slothower, Miss Meehan, Davidson, Wright, Gooby, Harrington. Below: Sketch of Service and Research Building



## A Look Over the Shoulder (continued)



bear its cost has been transferred and is already being used for the care of heart-lung patients. It will be a major factor in the treatment of patients in the new Arnold Center.

In even a brief review of ten years, the most telling evidence of the passage of time is this: in 1954 the total expense of the three units of St. Luke's was slightly in excess of \$6,500,000. In 1964, the expense figure had increased two and one half times to \$15,200,000.

Why?

The answers are not simple—for the figures which show patient care have actually not changed that much, in fact, in some areas we actually treated fewer patients in 1964 than we did in 1954. What has changed is the method by which patients are cared for and the technical skills of those involved in their diagnosis and treatments. Ten years ago the total number of determinations done in the clinical laboratories was 246,000. In 1964, there were 560,000 tests done for nearly the same number of patients. Most of those tests had not been devised ten or even five years ago. Because of these laboratory tests, the ills of patients were diagnosed more accurately; therapy or medication prescribed more exactly. Patients were returned home sooner and generally in better health than comparable patients a decade before.

Radio-active isotopes are used commonly as a diagnostic and treatment aid now. Ten years ago we used them very rarely.





X-ray equipment and techniques which now permit the physician to view nearly every organ and system of the body had not been developed ten years ago. Today, there are six of these "image intensifiers" in constant use at St. Luke's. They are an essential part of diagnosis for open-heart surgery and other sophisticated surgical procedures which were just being developed ten years ago.

These and other developments have created the increasingly complex structure of all hospitals and have meant the necessity of hiring vast numbers of skilled technical people. The total number of St. Luke's employees in 1954 was 1,350. Today there are nearly 2,000, and of these additional employees, most are technicians of various kinds. Moreover, in order to attract and keep the kind of personnel required to maintain excellence in all areas of the hospital, we have had to raise all of our salaries to levels roughly competitive to those of industry.

This item of salaries accounts, by itself, for the major increase in costs. And a steady stream of letters from patients who marvel at the care and attention they have received as patients at St. Luke's attests to the wisdom of this policy.

Perhaps the biggest change is this: in 1954 St. Luke's was an old, well known, highly respected hospital. Today it is a little older, and even more highly respected, for it has become not simply a good hospital but, in the truest sense, a medical center.

We look forward to the culmination of a merger brought into being twelve years ago. This physical union of St. Luke's and Woman's Hospitals opens up great opportunities for all of us—and more particularly offers to all patients the total resources of St. Luke's as a true medical and hospital center.

Our research activities have grown from a relatively annual modest expenditure of \$184,000 ten years ago until now, when annual grants total more than \$1,250,000. Many of the projects begun ten years ago, or more, have born rich dividends: the Cardiopulmonary Laboratory is now a world-renowned center for treatment and diagnosis continuing to carry on research on the problems of heart and lung.

The Nutrition Research Laboratory has sent to all parts of the world scientists who have received advanced training in nutrition and metabolism in the laboratories of St. Luke's. The Unit has provided to the good of industry as well as of the medical profession much information on problems of nutrition and metabolism and has in its own right become a recognized center.

Basic research in hematology and other fields has produced a wealth of new information to benefit all of mankind.

In the next ten years we shall complete a major program of expansion through renovation and new buildings, similar in effect to that program of expansion which we anticipated in the decade which was to follow 1954.

With the new facilities and the opportunities for further service which they embody, this report for the year 1974 should be one of even prouder accomplishment and broader service than this. For the moment, it is difficult not to feel that this past decade has been one in which St. Luke's has emerged through the efforts of all associated with it, as a major factor in the health not only of neighbors in the metropolitan area, but, through its programs of teaching and research, as an important factor to many, throughout the nation and the world, who may never see or hear of St. Luke's Hospital, but whose lives are better and healthier because of it.

No annual report could be considered complete without my expression of deep gratitude to the entire staff of the hospital for their dedication and service to humanity. To my associate, Mr. E. Grey Gooby, and his assistants, and to all department heads I extend my sincere appreciation for their continued support.



1964

1963

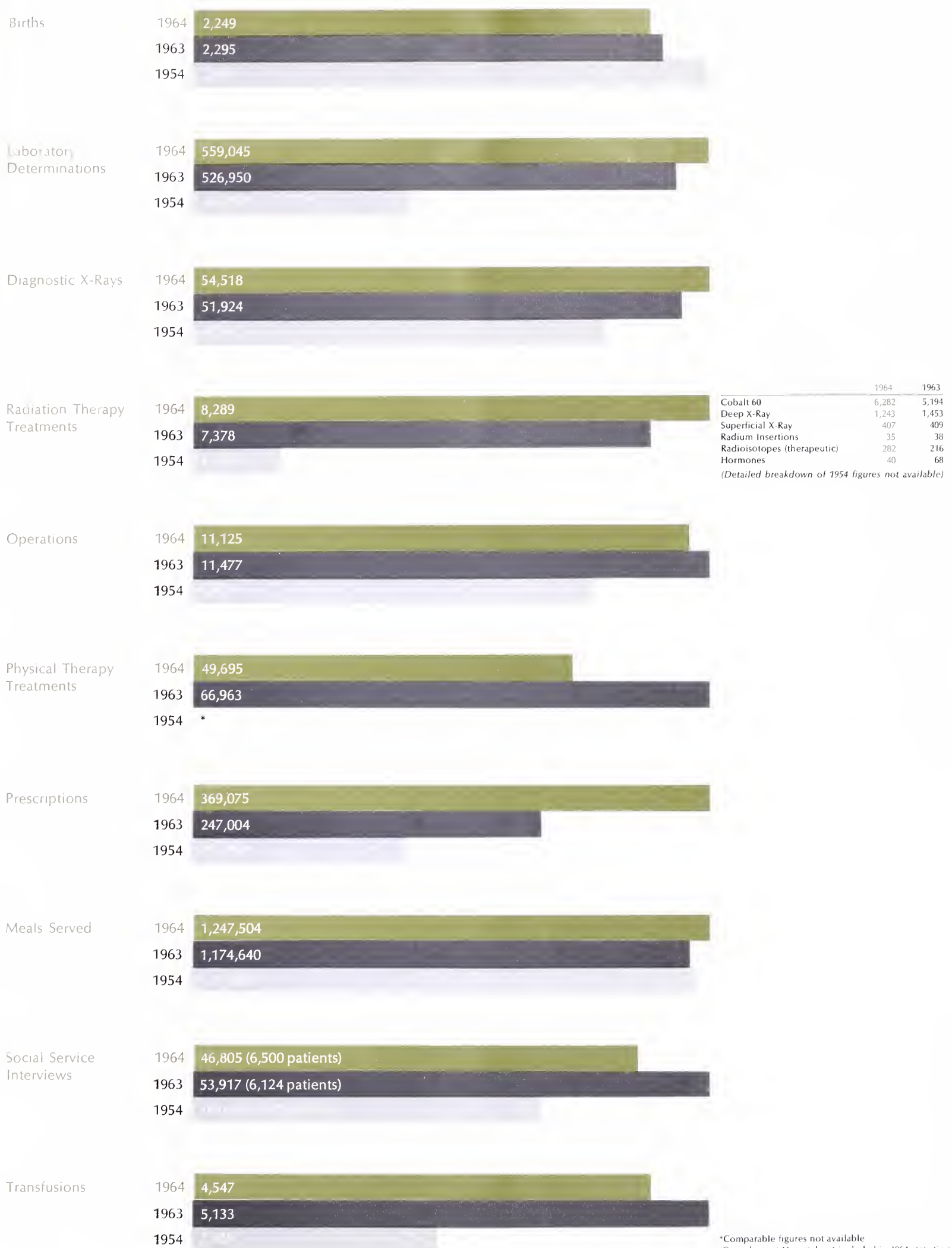
1954

## Condensed Statement of Income and Expense for the Year Ended December 31, 1964

	GENERAL HOSPITAL	CONVALESCENT HOSPITAL	WOMAN'S HOSPITAL	
NET OPERATING INCOME	\$10,148,235.28	\$ 63,161.05	\$2,101,163.36	\$12,312,559.69
OPERATING EXPENSES				
Salaries and Wages	\$ 8,624,647.91	\$228,733.35	\$2,193,421.64	\$11,046,802.90
Supplies and Expenses	3,652,946.76	92,762.42	777,926.93	4,523,636.11
Recovery of Expenses (Deducted)	(243,772.32)	(6,953.74)	(54,666.50)	(305,392.56)
NET OPERATING EXPENSES	\$12,033,822.35	\$314,542.03	\$2,916,682.07	\$15,265,046.45
NET OPERATING LOSS	\$ 1,885,587.07	\$251,380.98	\$ 815,518.71	\$ 2,952,486.76
SUPPLEMENTARY INCOME				
Income from Investments	\$ 1,089,387.02	\$ 70,467.02	\$ 287,322.44	\$ 1,447,176.48
Income from Estates and Trusts	81,436.98	—0—	321.76	81,758.74
Donations for General Purposes	142,162.82*	3,722.50	47,318.14*	193,203.46
United Hospital and Greater New York Fund	56,819.00	29,871.00	29,542.00	116,232.00
Income from Special Funds	437,033.83	100,037.95	19,753.23	556,825.01
Social Service Income	55,197.96	—0—	12,942.00	68,139.96
Miscellaneous Income	9,328.09	2,517.14	(4,022.30)	7,822.93
TOTAL SUPPLEMENTARY INCOME	\$ 1,871,365.70	\$206,615.61	\$ 393,177.27	\$ 2,471,158.58
PROFIT (LOSS) AFTER SUPPLEMENTARY INCOME	\$ (14,221.37)	\$ (44,765.37)	\$ (422,341.44)	\$ (481,328.18)
NON-OPERATING EXPENSES	\$ 76,137.24	\$ —	\$ 15,301.54	\$ 91,438.78
PROFIT (LOSS) BEFORE PROVISION FOR DEPRECIATION	\$ (90,358.61)	\$ (44,765.37)	\$ (437,642.98)	\$ (572,766.96)
PROVISION FOR DEPRECIATION	\$ 556,972.63	\$ 22,240.19	\$ 49,416.98	\$ 628,629.80
EXCESS OF EXPENSES OVER INCOME FOR THE YEAR	\$ 647,331.24	\$ 67,005.56	\$ 487,059.96	\$ 1,201,396.76

\*Donations for General Purposes in the amount of \$19,635 received by the General Hospital have been allocated to the Woman's Hospital by the Board of Trustees.  
Note: The Convalescent Hospital discontinued operations on May 1, 1964, and no income from patients or expenses directly related to patient care were incurred or recorded after that date. However, Convalescent Hospital supplementary income includes income earned on Convalescent Hospital endowment funds for the entire year 1964, and operating expenses include costs of maintenance until sale of the property on November 5, 1964, to which date depreciation has also been provided.





\*Comparable figures not available  
(Convalescent Hospital not included in 1964 statistics)

I nstead of confining this report to the year, 1964, it seems more appropriate to include a summary of the period during which it has been my great privilege to have been connected with the hospital and which will have come to an end by the time this report appears. For the past three years an arthritic condition in my hip has made it increasingly difficult for me to do the amount of standing and walking that is necessary and, finally, reached a point where an operation was indicated. This has made it necessary for me to resign a year earlier than was originally planned.

The most noticeable change that has taken place during this period is connected with the chapel. The fire which broke out in the organ loft proved to be a blessing in disguise because it resulted in a new organ and the renovation of the entire chapel which made it more beautiful than ever. The extension of the chapel balcony, which, also, was accomplished without any expense to the hospital, has, likewise, proved to be a blessing. It is still large enough to accommodate the congregations which have been steadily increasing

and the sense of corporate worship which can be felt in that "upper Room" is something about which a great many patients have commented. In this connection let me pay tribute, again, to the devoted group of volunteers, men and women, who transport patients to and from the service and without whose help the service could not be held. With the opening of the new Woman's Hospital pavilion it is quite possible that even the enlarged balcony will not be able to accommodate the congregations, in which case some other solution will have to be found. It was at the time of my coming to St. Luke's that another chaplain was added to the staff so that the regular ministrations of this Department might be extended to Woman's Hospital. When the new building is opened that ministry can be carried on more easily and more completely.

Other changes which have taken place are less noticeable and more difficult to describe. During this period there has been, I believe, an increasing rapport between the medical and nursing staffs, as well as Administration and other departments, and the chaplains. With the passage

of time more and more requests are being made for a chaplain to play his part in the total care of patients. The same situation exists in connection with the clergy whose parishioners are patients at St. Luke's. An increasing interchange of information between the hospital and the parishes is helpful to all concerned and, of course, primarily to the patient. Many patients choose St. Luke's, primarily because of the calibre of its medical and nursing staffs, but, also, partly because it is a Church Hospital.

In the future there will be other changes, in procedure or in emphasis, which will be made in the service rendered by the Department—and rightly so! My most sincere wish for my successor is that he will receive the same sort of friendship and cooperation that has been extended to me by so many members of the Hospital Family! Cornelius P. Trowbridge

**Department of Religious Services**

The Rev. Cornelius P. Trowbridge  
Director and Chaplain

The Rev. George C. Wyatt, Jr.  
Associate Chaplain

The Rev. James C. Walworth  
Associate Chaplain

The Rev. Richard M. Louis  
Associate Chaplain









## Counting Our Blessings

One of the most potent forces in the world is the harnessed enthusiasm of a number of dedicated and purposeful women. Two such groups, the Women's Auxiliary of St. Luke's Hospital and the Assistant Board of Woman's Hospital, do much for their two institutions. And together, as the Special Events Committee, they have held two immensely successful affairs and plan additional ones in future years to complete payment of their Dual Century Fund pledge.

In 1964, the Women's Auxiliary of St. Luke's Hospital again held their annual Fashion Show Luncheon, highlighted this year by a lavishly costumed presentation entitled "Fashion and Medicine through the Ages," staged by Mrs. Edward P. Childs. Proceeds went to redecorate the solarium on Plant and Scrymser floors one, two and three.

From the proceeds of the 1965 edition of the "Parade of Flowers," fashion show, the Auxiliary hopes to refurbish the dining room in the Nurses Residence in anticipation of its increased use. With the arrival of the Woman's Hospital many additional employees will be using these dining facilities.

This is one aspect of the coming move of the Woman's Hospital, but as the Assistant Board of that institution well knows, the move involves many kinds of activity and much excitement.





## St. Luke's Hospital Auxiliary

President:  
Mrs. John P. West

1st Vice-President:  
Mrs. John P. Lins

2nd Vice-President:  
Mrs. Hilton H. Stothers

Treasurer:  
Miss Gertrude R. Hoyt

Corresponding Secretary:  
Mrs. Theron O. Worth, Jr.

Recording Secretary:  
Mrs. C. Louis Gilbert



## Woman's Hospital Assistant Board

Honorary Chairman:  
Mrs. Walbridge S. Taft

Chairman:  
Mrs. John S. Burke, Jr.

Vice-Chairmen:  
Mrs. Clendenin J. Ryan  
Mrs. Robert McN. Smith

Secretary:  
Mrs. Harold F. McGuire

Treasurer:  
Mrs. John B. Aspegren

## Special Events Committee

Co-Chairmen:  
Mrs. J. Winston Fowlkes  
Mrs. John McN. Sullivan

Mrs. Aldo Balsam  
Mrs. S. Curtis Bird  
Mrs. John S. Burke, Jr.  
Mrs. Jarvis Cromwell  
Mrs. H. Clifford Gayley  
Mrs. Charles Hamrich  
Mrs. Peter Iselin  
Mrs. John P. Lins  
Mrs. Frank MacLear  
Mrs. Edgar Marston, 2nd  
Mrs. Clarence G. Michalis  
Mrs. Clifford W. Michel  
Mrs. Harold R. Mixsell  
Mrs. John F. Nixon  
Mrs. Clendenin J. Ryan  
Mrs. Edwin P. Stevens  
Mrs. John P. West  
Mrs. Theron O. Worth, Jr.

Members of the Assistant Board spent much time during 1964 planning the decor, selecting furnishings, etc., for the move scheduled for the spring of 1965. Presided over by Mrs. John S. Burke, the Assistant Board also continued their active support of all phases of Woman's Hospital activity.

The Special Events Committee, under the leadership of Mrs. J. Winston Fowlkes and Mrs. John Mc. Sullivan, staged the Top-of-the-Fair Ball, a glittering benefit held the week preceding the opening of the New York's World's Fair. Several hundred couples were present for the dinner and dancing and when the counting was over, nearly \$40,000 of the Auxiliary and the Assistant Board pledge was paid. Planned future events of this group include a showing and sale of important impressionist art, and events at the openings of one or more of New York's greatly heralded new attractions.

"Never underestimate the power of a woman" says the magazine slogan. The power of a number of women, all with the same objective in mind: the continued improvement and advance of St. Luke's and Woman's, helps to make our hospitals the unique and world-renowned institutions they are.

# Giving 1964

As each year the cost of operation seems to rise, so does the generosity of the growing number of friends of St. Luke's. In 1964 their gifts provided

funds for expansion of services in several departments, the purchase of major items of equipment, including an electron microscope, the care of those unable to pay, gifts to allow continued capital growth, and the support of investigative projects. ■ These research activities attracted

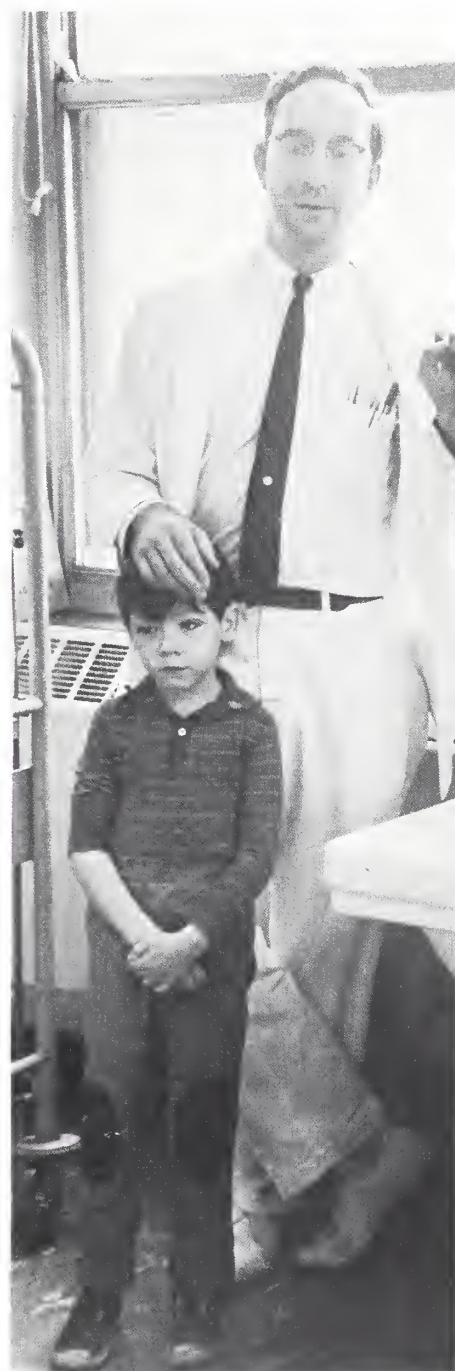
\$1,277,143 — more than ever before — and a record number of contributors gave \$148,500 for the current needs of the hospital. Capital gifts included one of the largest ever received by the Hospital, a grant from the James Foundation of New York of \$1,500,000, a bequest of land





valued at \$275,000 and many smaller gifts totaling \$426,852 ■ Along with financial help in the many areas of research, patient care needs, and new building, an opportunity exists to assist St. Luke's all important educational role. A gift or bequest here can, as in colleges and universities,

establish teaching chairs — on either an annual or perpetually endowed basis. Such opportunities exist in each of the 16 departments which conduct intern and residency training programs and in the St. Luke's School of Nursing. Further information may be obtained from the Executive Director.



Friends of the Hospital often desire to express their appreciation of the treatment of patients and the charitable work done by St. Luke's by a contribution to the work of the Hospital. Any information concerning the various needs of the Hospital can be obtained from the Executive Director.

**Form of Bequest** I give and bequeath to St. Luke's Hospital of New York City, a corporation created in the year 1850, under the Laws of the State of New York, or: I give and bequeath to Woman's Hospital for its corporate purposes, the sum of..... dollars.

**Form of Devise (real property)** I give and devise to St. Luke's Hospital of New York City, a corporation created in the year 1850, under the Laws of the State of New York, or: I give and devise to Woman's Hospital for its corporate purposes, all that, etc. (here describe the property).

See the school...



It is little . . . It is just one room  
...It is in the Hospital.

Fanciful primer? Not exactly, for PS 401X of the Bronx operates one of its 14 in-hospital schools on the Pediatrics floor at St. Luke's. To this unusual one room school come children in wheelchairs, on crutches or walking. Their school's faculty is Mrs. Estelle Stewart, a permanent teacher, appointed by the New York City Board of Education under a program to enable hospitalized children to keep up with their school work. As soon as the patients' class records have been sent to Mrs. Stewart, she is able, using the books and materials supplied by the Board of Education to schedule work of the same kind being done by the patients' more fortunate classmates. The classroom remains open during the morning, and in the afternoon, school, in the form of Mrs. Stewart, moves to bedsides of those children unable to make the trip down the hall.

P.S. 401X teaches children of grades one to nine. Hospitalized High School students receive special tutoring from representatives of the Bureau of Home Instruction of the Division of the Physically Handicapped. Similarly, when Mrs. Stewart's charges are ready to leave the Hospital, those who must remain at home for any period, are visited by representatives of one of these two agencies.

Assisting Mrs. Stewart, and enriching her program, are undergraduate and graduate students from Columbia University and Teacher's College who, as St. Luke's Hospital Volunteers, offer remedial reading and mathematics to young patients.

St. Luke's has had a class room for 25 years and now an average of 100 children are taught each semester. On any given morning from eight to ten will be waiting for the door to open, and Mrs. Stewart feels that the individual attention she is thus able to give, helps to make up for the reduced classroom time.

At St. Luke's, children continue to learn in their unique school: where uniforms are bathrobes; where some of the seats have wheels; and where, every once in a while, the lessons stop so Johnny can get his shot. ■

## HOME BY 1967

Tentatively scheduled for completion in 1967, the building to be constructed opposite the Clark building on Amsterdam Avenue, will provide apartment units for house staff and nurses. Not simply a convenience, the apartment-garage structure supplements present facilities. It places interns and residents close to their patients and creates more near-by housing, so essential today in maintaining adequate nursing staffs. The ultimate benefit of this project, like all such activity at St. Luke's, will be to the patient.

Specifically, there will be a three-level garage (two below ground—one above) for 150 cars; 127 apartment units; a floor of private professional suites and stores at street level.

If all goes well, the first of many doctors-in-training will be calling 1084 Amsterdam Avenue, "home" by 1967.







**St. Luke's Hospital Center, New York, N.Y.** ⊕ is accredited by: The Joint Commission on Accreditation of Hospitals. ⊕ is approved for intern and resident training in the specialties as follows: Anesthesiology, Cardiology, Dentistry, Dermatology, Internal Medicine, Obstetrics and Gynecology, Ophthalmology, Orthopedic Surgery, Otolaryngology, Pathology, Pediatrics, Plastic Surgery, Psychiatry, Radiology, Surgery, Urology. ⊕ is affiliated with: The College of Physicians and Surgeons, Columbia University. ⊕ is a member of: The American Hospital Association, The American Protestant Hospital Association, The Hospital Association of New York State, The Greater New York Hospital Association, The United Hospital Fund, The Greater New York Fund, Welfare Council of the City of New York. ⊕ is a participating hospital in the master plan for hospitals and related facilities of: The Hospital Council of Greater New York. ⊕ is a participating member of: The Exchange Visitors Program for Graduate Nurses. St. Luke's Hospital School of Nursing is approved by: The New York State Department of Education. ⊕ is fully accredited by: The National League for Nursing Accrediting Service.